

REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/751,347 Conf. # 1311
	Filing Date	December 31, 2003
	First Named Inventor	Thomas Stong, et al.
	Art Unit	1775
	Examiner Name	Savage, Jason L.
	Attorney Docket Number	66774-0073

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with
Customer Number:

OR

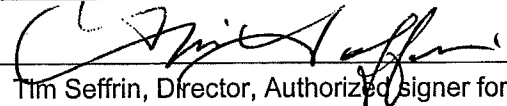
<input type="checkbox"/> Firm or Individual Name	RADER, FISHMAN & GRAUER PLLC Michael B. Stewart				
Address	39533 Woodward Avenue Suite 140				
City	Bloomfield Hills				
Country	US	State	MI	Zip	48304
Telephone	(248) 594-0600		Email	mbs@raderfishman.com	

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature			
Name	Tim Seffrin, Director, Authorized signer for Assignee		
Date	July 29, 2008	Telephone	231-724-1870

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of 1 forms are submitted.